209 North Main Street

PO Box 587

Phone 605-397-8422

Groton, South Dakota 57445-0587

AUTHORIZATION FOR AUTOMATIC	PAYMENTS			
I authorize the City of Groton and the bank			-	_
account. This authority will remain in effect allow the bank a reasonable opportunity to			_	
3 days before my account is charged. I can				
account up to 15 days following issuance of			_	-
(NAME OF FINANCIAL INSTITUTION				
•				
(ADDRESS OF FINANCIAL INSTITUTION)	(STREET)	(CITY)	(STATE)	(ZIP CODE)
· ·		, ,		
(SIGNATURE)			(DATE)	
(NAME- PLEASE PRINT)				
(ADDRESS- PLEASE PRINT)				
Checking Account No	(OR) Saving	s Account No.		
	(5, 544118	5500 dilic 1 10 1 _		
Bank Routing Number				
For Acc	uracy Please Attacl	n A Voided Ched	ck	

Please fill out the form and email it to library@grotonsd.net along with a scanned copy of a voided check. Information can also be mailed to PO Box 587, Groton, SD 57445 or dropped off at City Hall at 209 N Main St, Groton. Withdrawals can either be taken out the 3rd or the 8th of the month.